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CONFIRMATION NO. 3862

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|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------|
| SERIAL NUMBER<br>10/813,225 | FILING DATE<br>03/30/2004<br><br>RULE | CLASS<br>111 | GROUP ART UNIT<br>3671 | ATTORNEY<br>DOCKET NO.<br>17354 |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------|

## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* NONE

JMC

\*\* FOREIGN APPLICATIONS \*\*\*\*\* NONE

JMC

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/12/2004

|  |          |         |        |             |
|--|----------|---------|--------|-------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR | SHEETS  | TOTAL  | INDEPENDENT |
| 35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance | COUNTRY  | DRAWING | CLAIMS | CLAIMS      |
| Verified and<br>Acknowledged   | CANADA   | 5       | 19     | 3           |
| Examiner's Signature <u>JMC</u> Initials   |          |         |        |             |

## ADDRESS

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## TITLE

Equalizing meter device

|                                   |   |  |
|-----------------------------------|---|--|
| FILING FEE<br><br>RECEIVED<br>970 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____ |
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